TO: Community Health Centers

Community Organizations Faith-Based Institutions

FROM: Cassandra Dove, Director

Diabetes Prevention and Control Program

DATE: June 27, 2006

SUBJECT: Request for Proposals (RFP):

Competitive Mini-grants for Diabetes Prevention and Control

The Diabetes Prevention and Control Program is accepting proposals for competitive mini-grants. This is a great opportunity for communities to focus on health issues that increase awareness and prevention strategies in the area of diabetes prevention and management. Awards will range from \$1,500 to \$5,000 as follows:

Program	Amount of Award	Number of Awards
Capacity Building	\$1,500	3
Lower Extremity Amputation Prevention	\$4,000	2
Comprehensive (Continuation)	\$5,000	4

Please note the enclosed instructions/time lines in applying for funds. The Diabetes Prevention and Control Program encourages community and faith-based organizations to become involved in promoting diabetes prevention and control within their community.

To expedite the contractual process should your application be awarded, in addition to your application, please sign and submit the following enclosed items along with your application:

- Contract: Page 1, Section II
- Contract: Page 10, Section XXXVII. B. (Signatures Only)
- Contract: Page 11, Attachment B: Conflicts of Interest (Complete and Sign)
- W-9: Page 1 (Complete and Sign)
- Minority Vendor Verification Form, Page 1 (Complete and Sign)

If you have any questions regarding the RFP or need technical assistance, please contact me at (60l) 576-7207.

Request for Proposal

To Enhance Diabetes Prevention and Management Community Health Activities

for the

Mississippi Diabetes Prevention and Control Program
Mississippi Department of Health
Office of Preventive Health
570 East Woodrow Wilson- Annex 301
Jackson, Mississippi 39215-1700

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A. Background

The mission of the Diabetes Prevention and Control Program (DPCP) is to increase the quality of life for all Mississippians by reducing the incidence of diabetes and/or its related complications. Many strides must be made to increase the awareness of the severity of this disease throughout Mississippi. To aid in this, the DPCP will assist in developing, implementing, and assessing activities that lead to healthy behaviors with respect to diabetes control. The DPCP is funding activities to increase awareness of diabetes risk reduction, prevention/control methods and the mobilization of communities around health issues to make informed health decisions. Ultimately, community members should be able to influence policy makers, gatekeepers, and other community leaders to establish healthy policies, environments, and systems that improve health. This application process should result in innovative ways to move communities forward in addressing diabetes, one of the leading causes of death and disability in the state of Mississippi.

B. Diabetes Prevention and Control Program Goals

- 1. Increase the awareness of persons with diabetes receiving HgA1c testing, influenza and pneumococcal vaccinations, foot examinations, and eye exams as recommended by the American Diabetes Association.
- 2. Reduce health disparities for high risk populations with respect to diabetes prevention and control.
- 3. Establish or provide linkages to community health activities/programs that promote wellness, physical activity, weight control, blood pressure control, and smoking cessation.
- 4. Increase the awareness of proper nutrition to improve health and quality years of life among persons with or at risk for developing diabetes

C. Eligibility Criteria and Requirements

<u>Capacity Building</u> – an organization in the early stages of program development that wishes to improve their ability to conduct diabetes prevention and control projects. Organizational development activities may include but are not limited to: the establishment of a public health advisory council/coalition; the establishment of a mission statement, goals, and a community action plan; infrastructure improvement; identification/leveraging of community resources; diverse partnership building (public, private, and community).

- 1. The Public Health Advisory Council/Coalition must commit to meeting periodically to identify and address health needs of the community and to develop a community action plan to address those needs. The community action plan is not required to be a comprehensive strategic plan. The plan should identify at least one health related need, action steps, and a plan to evaluate community impact. The DPCP will provide technical assistance upon request.
- 2. The community action plan must be submitted with the final report to the Diabetes Prevention and Control Program.

Funds may be used to support a consultant, coalition meetings, mileage, printing, supplies, equipment, incentives, and health promotion related activities. Any health related activities proposed must contribute to accomplishing at least one of the Program goals listed above.

Lower Extremity Amputation Prevention LEAP - must be a federally qualified community health center that currently operates a **comprehensive** program for the prevention, early detection and management of neuropathic problems in persons with diabetes. The goal of LEAP is to prevent or minimize the number and percentage of lower extremity amputations by increasing patient access to trained professionals skilled in the provision of diabetes foot care, patient education, and appropriate referral to a foot care specialist when needed.

- 1. Foot care program staff must have clinical and practical training in the "Carville" approach to diabetes foot care and exhibit demonstrated knowledge and skill in the following:
 - Implementing the Lower Extremity Amputation Prevention Program (L.E.A.P:) e.g..-annual foot screening, patient education, appropriate footwear selection, daily self- inspection of the foot, and management of simple foot problem;
 - The mechanics of foot injury and pathway to lower extremity amputation in diabetes;
 - Identifying the foot at risk of injury and amputation in diabetes;
 - Outlining a comprehensive approach for the prevention of diabetes foot problems;
 - Outlining treatment principles for diabetes foot lesions;
 - Correctly measuring shoe fit and skin temperature in the high risk individual;
 - The performance of a diabetes foot screen, assessment of risk category and formulation of an appropriate treatment plan.
- 2. Participation in the Bureau of Primary Health Care Health Disparities Diabetes Collaborative.
- 3. Have an established diabetes foot care referral network.
- 4. Must be in good standing with the DPCP and Mississippi Department of Health

Funds may be used to support implementation of a comprehensive LEAP program. Foot care programs will be required to provide data on number/type of foot exams performed.

<u>Comprehensive Continuation</u> – a previously funded organization that has an established diabetes prevention and control program. Must be in good standing with the MDH Diabetes Prevention and Control Grants Program. Must have completed all prior stated goals and objectives successfully. Proposed activities must be a continuation of previously funded projects. Must have an established public health advisory council/coalition (formal or informal) of individual and organizational partners as described on page 5 under Requirements for all Grantees.

- 1. The Public Health Advisory Council/Coalition must commit to meeting periodically to identify and address health needs of the community and to develop a community action plan to address those needs. The community action plan is not required to be a comprehensive strategic plan. The plan should identify at least one health related need, action steps, and a plan to evaluate community impact. The DPCP will provide technical assistance upon request.
- 2. The community action plan must be submitted with the final report to the Diabetes Prevention and Control Program.

3. The organization must conduct activities that focus on at least one or more of the four diabetes prevention and control objectives listed on page three (3).

Funds may be used to support project activities including a consultant, coalition meetings, travel (mileage), printing, supplies, equipment, incentives, and health promotion related activities.

Requirements for all Grantees

- 1. Must be a not-for-profit organization within the state of Mississippi. Examples include but are not limited to:
- Churches
- Community Health Centers
- Volunteer clubs
- County Extension Office

- Coalitions
- Mayor or town council
- Health Associations
- Local Planning Districts
- 2. Must establish (or currently be a part of) local public health advisory council/coalition with multi-sector stakeholder participation for the purpose of community health improvement. Stakeholder representation should include but is not limited to:
- Business Community
- Civic Organizations
- Colleges & Universities
- Community Based Institutions
- Colleges & University Health Career Programs
- Consumers Faith Based Institutions
- Government Officials
- Health Care Providers

- Hospitals
- Media
- Local Health Departments
- Patient Advocacy Organizations
- Professional Organizations
- Recreation
- State Department of Health
- Transportation Public School
- 3. Awarded applicants will be required to participate in a mandatory training for Diabetes Today and the Ten Essential Public Health Services. The training will be held in your community; all coalition members must attend.
- 4. The organization must make a commitment to implement and provide quarterly reports on project activities.

D. Application Deadline

- Applications should be received by 5:00 pm, Friday, July 28, 2006.
- Award notifications will be made by August 7, 2006.
- The project period will begin September 1, 2006 and will conclude June 30, 2007.
- Applications may be mailed (address on page 9) or faxed to the attention of Cassandra Dove @ 601-576-7444.

E. Application Guidelines

Format

Grants are made on the basis of written applications only. Grant applications should be typed and submitted on standard 8 ½ by 11 inch paper. Three (3) copies should be provided. The proposal should be **five pages or less** including the budget.

Outline

- Cover Page (Item 1)
- Complete the content questions below (Items 2-7.)
- Provide a complete list of members of the local public health advisory council/coalition. If no coalition has been established, please provide a list of identified members/organizations that will be recruited to participate in the coalition.
- Provide letters of commitment from groups/individuals that commit to support the initiative.

Content

- 1. A cover page that includes the name, title, address, phone number, fax number, email address (if available) of the contact person for the lead organization and for the project, title of proposed project, and classification of funding that is being applied for (Capacity Building, LEAP, Comprehensive Continuation).
- 2. Describe why you are interested in addressing the problem of diabetes in your community. What are some of the problems that you see? (high rate of amputees, high rate of blindness, high rate of kidney disease, obesity in adults and children, lack of access to care, lack of access to exercise facilities). You may contact this office for diabetes related statistics for your community.
- 3. Provide a description of the demographics of the community/population that will benefit from this effort. (Examples: race, ethnicity, age group, socioeconomic status, disease status, housing complex, etc...)
- 4. Write a brief history. How have you partnered with other organizations prior to this activity? Who are your partners? Please provide a list of council members and mission statement. Describe partnerships that have addressed the problem. Describe any other community assets that will assist in your efforts. If you have received prior funding from the Diabetes Prevention and Control Program, please provide a summary of accomplishments.
- 5. What do you propose to do? Briefly describe some of the program activities that your group is considering. Provide program objectives and strategies. Funding will not be awarded for one time activities or events. The organization must show how the proposed project will be integrated into the overall mission/purpose of the organization and how leadership plans to support ongoing activities.
- 6. Complete an evaluation plan for your proposed activities.
- 7. Devise a detailed budget to include cost to support overall project activities. Items budgeted must be related to the project. Please note funds cannot be used to purchase medical supplies such as medicine or strips.

F. How to write Objectives and Strategies (This is only an example - Do Not Copy!)

Objectives should be SMART: Specific, Measurable, Attainable, Realistic, and Timely.

By June 2007, increase the number of persons who engage in 30 minutes of physical activity at least three times per week.

Strategies/Activities for Objective 1

- By June 2007, an exercise program will be initiated.
- By October 2006, thirty to sixty minute exercise sessions (video tapes or live instruction) will begin at the organization three times per week and will continue through March 2006.
- By November 2006, a walking club will be established.
- By November 2006, members will be recruited to meet and walk at least three mornings per week.

Evaluation for Objective 1

- Pre-tests will be utilized to assess the current status of physical activity among participants.
- Sign-in sheets will be utilized to record the number of attendees for exercise classes.
- Attendance rosters will be utilized for walking club members.

G. Sample Budget

Meetings	\$800
With parents/neighbors/teachers/school administrators With police officers, other officials Equipment/Materials	\$1,800
Surveys	
Handouts for meetings	
School promotional posters	
Community promotional material	
Science curriculum supplements	
Fitness equipment	
Park Revitalization	\$400
Food/Water	
Bags	
Paint for mural in bathrooms	
Health signs	
Re-do Tennis Court (In-Kind Donation)	
Basketball Goals (In-Kind Donation)	
TOTAL	\$3,000

Mail completed application to:
Cassandra Dove
Mississippi Department of Health
Diabetes Prevention and Control Program
570 East Woodrow Wilson Suite A-301
Jackson, MS 39215-1700

or

Fax to: Cassandra Dove 601-576-7444